

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

District of Oregon



Claude Sakr, an individual, and Laura Jackson, an
individual,

Plaintiff(s)

v.

City of Portland, an Oregon municipal corporation,
United States Department of Housing and Urban
Development, Adrienne Todman in her official
capacity as Acting Secretary of the US Dept of
Housing of Urban Development,

Defendant(s)

Civil Action No. 3:24-cv-01265-AN

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Adrienne Todman, in her official capacity as Acting Secretary of
the United States Department of Housing and Urban
Development 451 7th Street SW
Washington, DC 20410

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Lawson Fite
Schwabe Williamson & Wyatt
1211 SW Fifth Avenue, Suite 1900
Portland, OR 97204

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.



MELISSA AUBIN, Clerk of Court

By: s/g. Davis, Deputy Clerk

Date: 08/12/2024

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Civil Action No. _____

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)*: I mailed the Summons and Complaint to Adrienne Todman, in her official capacity as Acting Secretary of the United States Department of Housing and Urban Development, 451 7th Street SW, Washington DC 20410 on August 13, 2024 by certified mail, return receipt requested and it was signed for on August 21, 2024.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 10/09/2024



Server's signature

Carla Weckel

Printed name and title

Schwabe Williamson & Wyatt
1211 SW Fifth Avenue, Suite 1900
Portland, OR 97204

Server's address

Additional information regarding attempted service, etc:

U.S. Postal Service™ **CERTIFIED MAIL® RECEIPT**
 Domestic Mail Only **286637**
 For delivery information, visit our website at www.usps.com®

OFFICIAL RECEIPT

Certified Mail Fee \$ **4.85**

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ **4.10**

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$ **2.59**

Total Postage and Fees \$ **11.54**

Sent To **Adrienne Todman**
 In her Official Capacity as Acting Secretary
 Of the US Department of Housing & Urban
 Development
 451 7th Street SW
 Washington, DC 20410

PS Form 3800, 9589 0710 5270 0625 2089 63

PORTLAND OR
AUG 13 2024
 Postmark Here

CWE 143039- 286637

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X Buttaugh <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) B. Groomes C. Date of Delivery 8/21/2024</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Adrienne Todman In her Official Capacity as Acting Secretary Of the US Department of Housing & Urban Development 451 7th Street SW Washington, DC 20410</p>	<p>Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0625 2089 63</p>	<p><input type="checkbox"/> Restricted Delivery RRR</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	

Domestic Return Receipt